

Attorney Docket K35A0863

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As the below named inventor(s), I/we declare that:

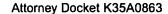
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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

| This declaration is | s directed to: |
|--|--|
| | ☐ The attached application, or |
| | Application No09/920,665, filed on7/31/2001, |
| | as amended on(if applicable); |
| I/we believe that which a patent is | I/we am/are the original and first inventor(s) of the subject matter which is claimed and for sought; |
| | ved and understand the contents of the above-identified application, including the claims, as amendment specifically referred to above; |
| to me/us to be became available | e the duty to disclose to the United States Patent and Trademark Office all information known material to patentability as defined in 37 CFR 1.56, including material information which e between the filing date of the prior application and the National or PCT International filing nuation-in-part application, if applicable; and |
| belief are believe false statements | nade herein of my/own knowledge are true, all statements made herein on information and ed to be true, and further that these statements were made with the knowledge that willful and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may alidity of the application or any patent issuing thereon. |
| FULL NAME OF | INVENTOR(S) |
| | RAFFI CODILIAN |
| Signature: | Citizen of: UNITED STATES |
| Inventor two: | WILLIAM D. JOHNS |
| Signature: | Citizen of: UNITED STATES |
| Inventor three: | CHARLES A. PARK |
| Signature: | Citizen of: UNITED STATES |
| Inventor four: | DAVID D. NGUYEN |
| Signature: | GVIL D. NAMM Citizen of: UNITED STATES |
| ☐ Additional invent | ors are being named on additional form(s) attached hereto. |

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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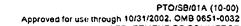
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|--|--------------------|--|--|-----------------------------|---|
| | | The attached applic | ation, or | | |
| | | Application No | 09/920,665 | , filed on_ | 7/31/2001, |
| | | as amended on | | | (if applicable); |
| I/we believe tha which a patent i | | | d first inventor(s) o | f the subject | matter which is claimed and for |
| | | nd understand the condition during the desired desired the desired | | -identified a | oplication, including the claims, as |
| to me/us to be became availab | mater le betw | ial to patentability as | s defined in 37 C f the prior applica | FR 1.56, in | demark Office all information known cluding material information which National or PCT International filing |
| belief are believe false statements | ved to s and th | be true, and further | that these stateme by fine or impriso | ents were m nment, or bo | ts made herein on information and lade with the knowledge that willful oth, under 18 U.S.C. 1001, and may |
| FULL NAME O | FINVE | NTOR(S) | | | |
| Inventor one: | RAFFI | CODILIAN | | | |
| Signature: | | | Citize | n of: UNITE | ED STATES |
| Inventor two: | WILLI | AM D. JOHNS | | | |
| Signature: | \$ | in far | Citizo | en of: UNIT | ED STATES |
| Inventor three: | CHAF | RLES A. PARK | | | |
| Signature: | | | Citiz | en of: UNIT | ED STATES |
| Inventor four: | DAVI | D. NGUYEN | | | |
| Signature: | | | Citiz | en of: UNI | TED STATES |
| | | being named on | a delition o | I form(s) attach | and harata |

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|---|---|--|--|
| | | | |
| This declaration is dire | ected to: | | |
| | The attached application, or | | |
| ∠ | Application No. 09/920,665 , filed on 7/31/2001 , | | |
| | as amended on(if applicable); | | |
| I/we believe that I/we which a patent is sou | am/are the original and first inventor(s) of the subject matter which is claimed and for ght: | | |
| | and understand the contents of the above-identified application, including the claims, as endment specifically referred to above; | | |
| I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and | | | |
| All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon. | | | |
| FULL NAME OF INV | ENTOR(S) | | |
| Inventor one: RAFI | FI CODILIAN | | |
| Signature: | Citizen of: UNITED STATES | | |
| Inventor two: | LIAM D. JOHNS | | |
| Signature: | Citizen of: UNITED STATES | | |
| Inventor three: CHA | ARLES A. PARK | | |
| Signature: | MAN PER Citizen of: UNITED STATES | | |
| Inventor four: DAV | /ID D. NGUYEN | | |
| Signature: | Citizen of: UNITED STATES | | |

Additional inventors are being named on _____additional form(s) attached hereto.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| Application Number | 09/920,665 |
|------------------------|----------------|
| Filing Date | 7/31/2001 |
| First Named Inventor | RAFFI CODILIAN |
| Group Art Unit | 2651 |
| Examiner Name | UNKNOWN |
| Attorney Docket Number | K35A0863 |

| I hereby appoint: | |
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| Practitioners at Customer Number 26332 OR Dractitioners(a) paged below: | Place Customer Number Bar Code Label here |
| Practitioner(s) named below: Name | Registration Number |
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| as my/our attorney(s) or agent(s) to prosecute the application id business in the United States Patent and Trademark Office con | entified above, and to transact all nected therewith. |
| Please change the correspondence address for the above-identi | fied application to: |
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| City | State Zip |
| Country | |
| Telephone F | ax |
| I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.7 Statement under 37 CFR 3.73(b) is enclosed. (Form PTC) | |
| SIGNATURE of Applicant or Assigne | e of Record |
| Name RAFFI CODILIAN | |
| Signature William Ladelian | |
| Date ///2/0/ | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest of forms if more than one signature is required, see below*. | r their representative(s) are required. Submit multiple |
| □ *Total of4forms are submitted. | |

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| Application Number | 09/920,665 | • | |
|------------------------|----------------|---|--|
| Filing Date | 7/31/2001 | | |
| First Named Inventor | RAFFI CODILIAN | | |
| Group Art Unit | 2651 | | |
| Examiner Name | UNKNOWN | | |
| Attorney Docket Number | K35A0863 | | |

| I hereby appoint: | | | | |
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| as my/our attorney(s) or business in the United S | agent(s) to prosecu States Patent and Tra | te the application ademark Office co | dentified abo nnected ther | ove, and to transact all rewith. |
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| | r. d of the entire intere 37 CFR 3.73(b) is e | | | |
| | SIGNATURE of A | pplicant or Assign | ee of Record | |
| Name WILLIA | MD. JOHNS | | | |
| Signature | do | | | |
| Date 11/12 | 101 | | | |
| NOTE: Signatures of all the inventor forms if more than one signature is | | d of the entire interest | or their represe | entative(s) are required. Submit multiple |
| | ns are submitted. | | | |

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| Group Art Unit | 2651 | |
| Examiner Name | UNKNOWN | |
| Attorney Docket Number | K35A0863 | |
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| Practitioners at C | Customer Number | 26332 | | Number Bar Code | } |
| OR | | | | Label here |) |
| Practitioner(s) na | med below: | | | | |
| | Name | | Regi | istration Number | |
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| as my/our attorney(s) o | r agent(s) to prosecute | the application | identified abo | ove, and to transact all | |
| business in the United | States Patent and Trac | demark Office co | nnected ther | ewith. | |
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| I am the: | | | | | |
| Applicant/Invent | or. | | | | |
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| Assignee of reco | ord of the entire interes or 37 CFR 3.73(b) is en | closed. (Form P | TO/SB/96). | | |
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| | | phoant of Assig | ice of Record | | |
| Name CHAR | LES A. PARK | | · | | |
| Signature | only of Kon | <u> </u> | | | |
| Date 1/ | 1,301 | | | | |
| NOTE: Signatures of all the inve | ntors or assignees of record | of the entire interes | t or their repres | entative(s) are required. Submit r | multiple |
| forms if more than one signature | is required, see below. | | | | |
| Total offo | orms are submitted. | | | | |

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| Application Number | 09/920,665 |
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| Filing Date | 7/31/2001 |
| First Named Inventor | RAFFI CODILIAN |
| Group Art Unit | 2651 |
| Examiner Name | UNKNOWN |
| Attorney Docket Number | K35A0863 |

| I hereby appoint: | |
|---|---|
| Practitioners at Customer Number OR Practitioner(s) named below: | Place Customer Number Bar Code Label here |
| Name | Registration Number |
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| as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | |
| Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR | |
| Firm or | |
| Individual Name Address | |
| Address | |
| | tate Zip |
| Country | |
| Telephone F | ax |
| I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | |
| SIGNATURE of Applicant or Assignee of Record | |
| Name DAVID D. NGUYEN | |
| Signature David Daymyn | |
| Date 11/12/61 | |
| NOTE: Signatures of all the inventors or assignees of record of the entire inverest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | |
| □ *Total of 4forms are submitted. | |

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